

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Inland Empire Taxpayers Association Federal PAC

ADDRESS (number and street) ▼

4201 Brockton Ave Ste 100

☐ Check if different than previously reported. (ACC)

Riverside

CA

92501

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00568261

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

04

01

2016

06

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard Teaman

Signature of Treasurer

Richard Teaman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

07

12

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Inland Empire Taxpayers Association Federal PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		513.06
(b) Cash on Hand at Beginning of Reporting Period.....	181.99	
(c) Total Receipts (from Line 19)	5040.98	5041.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5222.97	5554.32
7. Total Disbursements (from Line 31)	3830.16	4161.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1392.81	1392.81
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Inland Empire Taxpayers Association Federal PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
04 / 01 / 2016

To:

M M / D D / Y Y Y Y Y
06 / 30 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

5000.00

5000.00

(ii) Unitemized

40.00

40.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5040.00

5040.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

5040.00

5040.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.98

1.26

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

5040.98

5041.26

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

5040.98

5041.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	271.25	602.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	271.25	602.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	3558.91	3558.91
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3830.16	4161.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3830.16	4161.51

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5040.00	5040.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5040.00	5040.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	271.25	602.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	271.25	602.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Inland Empire Taxpayers Association Federal PAC

Full Name (Last, First, Middle Initial)

A. Kenworth Capital, Inc.

Mailing Address 916 Southwood Blvd Ste 1G PO BOX

City State Zip Code
Incline Village NV 89450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General

☒ Other (specify) ▼
Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : 11AI-29

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 10
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Inland Empire Taxpayers Association Federal PAC

Full Name (Last, First, Middle Initial)

A. Provident Bank

Mailing Address 3756 Brockton Ave.

City State Zip Code
 Riverside CA 92506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼
 Calendar year

Aggregate Year-to-Date ▼

1.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : 17-32-O

Amount of Each Receipt this Period

0.51

☐ Memo Item

Interest

Full Name (Last, First, Middle Initial)

B. Provident Bank

Mailing Address 3756 Brockton Ave.

City State Zip Code
 Riverside CA 92506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼
 Calendar year

Aggregate Year-to-Date ▼

1.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2016

Transaction ID : 17-31-O

Amount of Each Receipt this Period

0.43

☐ Memo Item

Interest

Full Name (Last, First, Middle Initial)

C. Provident Bank

Mailing Address 3756 Brockton Ave.

City State Zip Code
 Riverside CA 92506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼
 Calendar year

Aggregate Year-to-Date ▼

1.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2016

Transaction ID : 17-28-O

Amount of Each Receipt this Period

0.04

☐ Memo Item

Interest

SUBTOTAL of Receipts This Page (optional)..... ►

0.98

TOTAL This Period (last page this line number only)..... ►

0.98

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Inland Empire Taxpayers Association Federal PAC

A. Teaman Ramirez & Smith Inc.

Mailing Address 4201 Brockton Ave. Ste. 100

City	State	Zip Code
Riverside	CA	92501

Purpose of Disbursement
March & April 2016 campaign reporting services

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 21B-48

Amount of Each Disbursement this Period

231.25

 Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

 Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

 Memo Item

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

231.25

231.25

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 9 OF 10
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

Inland Empire Taxpayers Association Federal PAC

FEC IDENTIFICATION NUMBER ▼

C C00568261

Check if ☐ 24-hour report ☐ 48-hour report☐ New report ☐ Amends report filed onM M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Full Name of Payee

Politcal Marketing International, Inc.

☐ Memo Item

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Mailing Address

PO Box 698

Amount

City

Marianna

State

FL

Zip Code

32447

Purpose of Expenditure

Automated phone calls

Category/
Type

004

1783.68

Transaction ID : E-49

Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Name of Federal Candidate

Paul Chabot

☐ Support☒ Oppose

Office Sought:

☒ House

District: 31

☐ President☐ Senate

State: CA

Calendar Year-To-Date
Per Election for Office Sought

3558.91

Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶

Full Name of Payee

Political Data Inc.

☐ Memo Item

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Mailing Address

PO Box 59570

Amount

City

Norwalk

State

CA

Zip Code

90652

Purpose of Expenditure

Automated phone file

Category/
Type

004

775.23

Transaction ID : E-50

Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
06 / 03 / 2016

Name of Federal Candidate

Paul Chabot

☐ Support☒ Oppose

Office Sought:

☒ House

District: 31

☐ President☐ Senate

State: CA

Calendar Year-To-Date
Per Election for Office Sought

3558.91

Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

2558.91

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Richard Teaman

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 10 OF 10
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Inland Empire Taxpayers Association Federal PAC			FEC IDENTIFICATION NUMBER ▼ C C00568261	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY				
Full Name of Payee Dillon Lesovsky			<input type="checkbox"/> Memo Item	
Mailing Address 13423 Waco Dr. Apple Valley			Date of Public Distribution/Dissemination 06 / 01 / 2016	
City Apple Valley		State CA	Zip Code 92308	Amount 1000.00
Purpose of Expenditure Website consultant, domain purchase, hosting and website design		Category/Type 004		Transaction ID : E-51 Date of Disbursement or Obligation 06 / 07 / 2016
Name of Federal Candidate Paul Chabot		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>31</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought		3558.91		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee			<input type="checkbox"/> Memo Item	
Mailing Address			Date of Public Distribution/Dissemination MM / DD / YYYYYY	
City		State	Zip Code	Amount
Purpose of Expenditure		Category/Type 		Date of Disbursement or Obligation MM / DD / YYYYYY
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 1000.00				
(b) SUBTOTAL of Unitemized Independent Expenditures▶ 				
(c) TOTAL Independent Expenditures.....▶ 3558.91				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Richard Teaman		[Electronically Filed]		Date 07 / 12 / 2016